



Christine Smith MP

Member for Burleigh

AGED CARE

Mrs SMITH (Burleigh—ALP) (10.00pm): Mr Speaker, this is not the first time I have spoken about the care of our elderly relatives and friends in aged care facilities.

Many older people find that living at home becomes more difficult for a variety of reasons. It may be that an admission to hospital is the catalyst for leaving home.

In June 2009 there were 336 older people in public hospitals who no longer had a clinical need to be there. We need to ensure that when they no longer require hospital services they can receive the services and care that they need in the most appropriate setting.

For anyone who has had to make the decision to move a loved one into residential aged care, it can be very distressing – even more so for the person giving up his or her home and, in some cases they believe, their freedom.

The Commonwealth Treasury's *Intergenerational Report 2010* tells us that by 2050, we will see the number of people aged 65 to 84 years more than double.

This means that Australians in increasing numbers will be looking for residential accommodation.

Often, it is only when we have personal exposure to a situation that we become aware of the needs and in this case the lack of appropriate facilities.

When older people access residential aged care, as well as appropriate nursing care, they need to feel safe, secure and well-cared for. I have seen incidences of neglect that would make you cry. Older people with few visitors, who may have dementia and clearly have no idea where they are.

They are dependent on the staff to care for them. Care, not just meet their day to day needs, but care. Everyone wants to feel loved and cared for.

It is clear to me that aged care facilities are generally understaffed. Unlike child care facilities, where there is a legislated ratio of staff to children, there is no requirement on owners of these facilities to meet a level of staffing.

One nurse and one assistant over night is often the norm. This is not fair on the staff or the residents.

I have written to the federal government asking that this matter be reviewed – for the benefit of all those concerned.

I believe nursing is a vocation, not just a job. Those who choose the profession do so because they want to ensure that those they nurse receive the best care available.

However, wages for nurses working in the aged care sector are significantly below those working in other areas. This makes it difficult for facilities to keep good staff. It is time these nurses were paid for their qualifications and experience, at the rate of their counterparts in public hospitals.

I applaud the current focus on aged-care facilities and treatment of residents and believe only good can come out of this discussion. Those in care deserve much better.

My mother has recently taken up residence in a brand new facility on the Gold Coast. It is beautifully furnished and the staff are very friendly and helpful, but it is more important to me, that she is treated with dignity and respect.

So far so good!



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Mrs SMITH (Burleigh—ALP) (9.43pm): Mr Deputy Speaker, just two weeks ago I spoke in this House about residents in aged care facilities.

Since then the topic has received considerable media attention, due to the Prime Minister's proposed national health care reforms. I refer specifically to his announcement to help fund an additional 5000 new aged care beds.

As mentioned in my previous speech, my mother has just entered an aged care facility. It has given me a better understanding of the issues and I can see many holes!

Tonight, I want to give Members a break down on the financial costs to someone entering a facility as an assessed 'Low Care' resident. Firstly, there is the Accommodation Bond – in my mother's case it was \$450,000. Of course, to raise this sum she had to sell her house. This Bond is paid to the providers and goes into their account.

She receives no interest on this money – the interest goes to the providers – an amount in excess of \$30,000 per year. The provider is also authorised to take \$3,500 per year from the bond (up to a maximum of approx \$17,000). Her income tested fee is \$733.00 per fortnight (or \$19,000 a year).

Not only has she lost the interest on her capital, it is costing approximately \$52,000 a year to remain in care. \$1,000 a week! My question is how many people can afford to pay this sum? It seems to me not too many.

I'm happy to see people pay who can afford to, but what about those who cannot. Don't they also have a right to appropriate care? Why should they not be able to access suitable accommodation?

In my mother's facility there are currently 100 empty beds; in a facility not more than 200 metres away there are about 50 empty beds and two kilometres up the road there are another 50 empty beds. That's 200 beds available and waiting for residents.

I find it disgusting that over 300 elderly people are languishing in hospital beds when they could be moved immediately into purpose built facilities, but they can't because they don't have the personal funds to pay. If we are looking at the cost of care, I'm told it is more cost effective to have people in an aged care facility than in a hospital bed.

Perhaps Mr Rudd, instead of providing funding for more beds, could look at how existing funding can be better utilised and how beds can be made available to people with a need but no financial backing. .

Those who have led active, fulfilling and nurturing lives are now relying on us to provide the very care they have spent a lifetime giving.

Father Pat Molony, the Parish Priest in Burleigh Heads, asked in his homily last Sunday why some cultures have 'elders' and others 'the elderly'. This struck a chord with me.

We need to ensure that our 'elders' are receiving the best care in appropriate surroundings and that their needs are at the forefront of the health care reforms.



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Mrs SMITH (Burleigh—ALP) (7.28pm): The treatment of residents in aged care facilities is a hot topic at the moment. Listening to callers on talk back radio it would seem the lid has been lifted off Pandora's Box.

Often, it is only when we have a personal exposure to a situation that we become aware of what is happening. This has recently been my experience.

Three months ago my 84 year old mother had major surgery and all did not go according to plan. Unexpected complications meant that she was unable to return home for a period of time.

After discharge from hospital she was transferred to a private hospital in Southport.

Her stay in the private hospital was less than satisfactory. She was delivered by ambulance mid-afternoon, but when I went to visit her in the evening, she was no where to be found.

When I told the nurse my mother had just rung me from the hospital, she remembered a woman had been brought in but staff had been too busy to admit her.

She had been left alone in a single room for five hours and when I found her she was scared and disoriented, begging me to take her home.

The nurse on duty apologised but said there with 19 patients in her care she had not yet got to my Mum. She was obviously over-worked and the facility grossly under-staffed.

After a few days, things were no better. My mother complained of bullying from some staff, delays in medication being offered and lack of help with personal hygiene.

On discussing my concerns with the Manager of the facility, I was told she was manipulative and I should not be concerned. Needless to say, I signed her out of the hospital and took her home.

When I could not provide full-time care, respite in an aged-care facility seemed the answer. Here, the furnishings and surroundings were beautiful, the food good and the staff friendly.

However, elderly residents need much more than this. They need to feel safe, secure and well-cared for. They do not deserve to be ignored or treated with disdain, to be yelled at by some staff members, to be treated differently from how we would like our own family members to be treated.

Some residents I spoke to were too frightened to speak out. They were frail, elderly men and women who felt they would in some way be punished. I found that to be an appalling indictment of a system that is meant to care for the most vulnerable members of our community.

I believe nursing is a vocation, not just a job. Those who choose the profession do so because they want to be able to help people. However, when owners and operators of aged-care facilities, cut corners and run centres with too few staff, it reflects badly on everyone.

I applaud the current focus on aged-care facilities and treatment of residents and believe only good can come out of this discussion. Those in care deserve much better.

Finally, my Mum is now back in her own home, getting stronger and learning to manage on her own.

